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## Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

### **Privacy Notice**

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

### Local Planning Authority details:

### Publication of applications on planning authority websites

# Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

| 1. Applic              | ant Name and Address              | 2. Agent Name and Address                                |  |  |
|------------------------|-----------------------------------|--|--|--|
| Title:                 | Mr First name: Paul               | Title: Miss First name: Hannah                           |  |  |
| Last name:             | Terry                             | Last name: Ridley  |  |  |
| Company<br>(optional): | ADAPT (Atkins and Doosan Babcock) | Company<br>(optional): ADAPT (Atkins and Doosan Babcock) |  |  |
| Unit:                  | House House suffix:               | Unit: House House suffix:                                |  |  |
| House<br>name:         | Galemire Court                    | House name: Rutherford House                             |  |  |
| Address 1:             | Crow Park Way                     | Address 1: Ingwell Drive                                 |  |  |
| Address 2:             | Westlakes Science Park            | Address 2: Westlakes Science Park                        |  |  |
| Address 3:             | Moor Row                          | Address 3: Moor Row                                      |  |  |
| Town:                  | Whitehaven                        | Town: Whitehaven   |  |  |
| County:                | Cumbria                           | County: Cumbria  |  |  |
| Country:               | England                           | Country: England   |  |  |
| Postcode:              | CA24 3HY                          | Postcode: CA24 3JZ                                       |  |  |

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| 3. Site Ac  | Idress Details                     | 4. Pre-application Advice   |  |  |  |
|---|------------------------------------|---|--|--|--|
| Please provide the full postal address of the application site.                               |                                    | Has assistance or prior advice been sought from the local   |  |  |  |
| Unit:   | 19House<br>number:House<br>suffix: | authority about this application?   |  |  |  |
| House<br>name:  | Plot 19                            | If Yes, please complete the following information about the advice<br>you were given. (This will help the authority to deal with this |  |  |  |
| Address 1:  | Leocnfield Industrial Estate       | application more efficiently).<br>Please tick if the full contact details are not   |  |  |  |
| Address 2:  | Cleator Moor                       | known, and then complete as much as possible:   |  |  |  |
| Address 3:  |                                    | Officer name:<br>Paul Telford (Constant) & Kevan Buck (Constant)  |  |  |  |
| Town:   |                                    | Paul Telford ( Reference:   |  |  |  |
| County:   | Cumbria                            |   |  |  |  |
| Postcode<br>(optional):   | CA25 5QB                           | Date (DD/MM/YYYY): 09/08/2022<br>(must be pre-application submission) 16/09/2022  |  |  |  |
| Description of location or a grid reference.<br>(must be completed if postcode is not known): |                                    | Details of pre-application advice received?   |  |  |  |
| Easting:  | Northing: 515546                   | Approval of submitted Environmental Management Plan with details sufficient to discharge all conditions.                              |  |  |  |
| Description:  |                                    | Emails from both condition consultants attached confirming they are   |  |  |  |
| Plot 19 Leconfield Industrial Estate  |                                    | happy with the proposal to discharge all conditions.  |  |  |  |
|   |                                    |   |  |  |  |
| 5. Description Of Your Proposal   |                                    |   |  |  |  |

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

| TEMPORARY CONSTRUCTION, TESTING AND DEMOLITION OF A MOCK CHIMNEY STRUCTURE, ERECTION OF A DEMOLITION PLATFORM AND ASSOCIATED WORKS. 19 LECONFIELD INDUSTRIAL ESTATE, CLEATOR MOOR   |             |            |     |   |  |  |
|---|-------------|------------|-----|---|--|--|
| Reference number: 4/22/2256/0F1 Date of decision:   |             | 02/09/2022 |     | Oate must be pre-application submission) (DD/MM/YYYY) |  |  |
| Please state the condition number(s) to which this application relates:   |             |            |     |   |  |  |
| 1.  | Condition 4 |            | 6.  |   |  |  |
| 2.  | Condition 5 |            | 7.  |   |  |  |
| 3.  | Condition 6 |            | 8.  |   |  |  |
| 4.  |             |            | 9.  |   |  |  |
| 5.  |             |            | 10. |   |  |  |
| Has the development already started?  |             |            |     |   |  |  |
| If Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)   |             |            |     |   |  |  |
| Has the development been completed?   |             |            |     |   |  |  |
| If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)   |             |            |     |   |  |  |
| <ul> <li>6. Discharge Of Condition         Please provide a full description and/or list of the materials/details that are being submitted for approval:         The attached submitted Environmental Management Plan details the proposal for discharge of all conditions.         We have also attached the email confirmations from the consultants, Paul Telford and Kevan Buck, confirming approval of the management plan sufficient to discharge these conditions.     </li> </ul> |             |            |     |   |  |  |
| 7. Part Discharge Of Condition(s)   |             |            |     |   |  |  |
| Are you seeking to discharge only part of a condition? Yes X No<br>If Yes, please indicate which part of the condition your application relates to:   |             |            |     |   |  |  |
|   |             |            |     |   |  |  |

| 8. Planning Application Requirements - Checklist<br>Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all<br>information required will result in your application being deemed invalid. It will not be considered valid until all information required by<br>the Local Planning Authority (LPA) has been submitted.  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| The original and 3 copies* of a The completed and dated application form:  | original and 3 copies* of other plans and drawings<br>formation necessary to describe the subject of the application:  |  |  |  |  |  |
| The correct fee:   |  |  |  |  |  |  |
| *National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options. |  |  |  |  |  |  |
| 9. Declaration         I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.         Signed - Applicant:       Or signed - Agent:   |  |  |  |  |  |  |
| Date (DD/MM/YYY):  |  |  |  |  |  |  |
| 08/09/2022 (date cannot be pre-application)  |  |  |  |  |  |  |
| 10. Applicant Contact Details  | 11. Agent Contact Details  |  |  |  |  |  |
| Telephone numbers       Extension number:         +44       Mobile number (optional):         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Email address (optional):   | Telephone numbers       Extension number:         +44       ••••••••••••••••••••••••••••••••••••   |  |  |  |  |  |
| 12. Site Visit   |  |  |  |  |  |  |
| Can the site be seen from a public road, public footpath, bridleway or<br>If the planning authority needs to make an appointment to carry<br>out a site visit, whom should they contact? ( <i>Please select only one</i> )<br>If Other has been selected, please provide:<br>Contact name:   | Tother public land?       X       Yes       No         X       Agent       Applicant       Other (if different from the agent/applicant's details)         Telephone number:       Telephone number:       Telephone number: |  |  |  |  |  |
|  |  |  |  |  |  |  |